

District Grant-Final Report Form 2021-22

Upload this completed form to your grant record at www.matchinggrants.org/district.

For any questions contact District 5790 District Grant Sub-committee chair Dusty Babitzke
dustybabitzke@yahoo.com

Do not send this form directly to Rotary International.

Rotary Club: Metroport Rotary Club Project Number: P-4160

Project Title: Community Support Therapy

Project Description

1. Briefly describe the project. What was done, when and where did project activities take place, and who were the beneficiaries?

Metroport Rotary partners with local organizations to help the physically and mentally disabled move toward positive outcomes that help individuals, families and communities deal with physical, mental and emotional disabilities that financially cripple them.

- This grant supported Victory Therapy Center, a locally based organization that offers the benefits of equine-assisted therapy and psychotherapy for individuals with physical, mental, or emotional disabilities and challenges. This grant enabled Victory to provide approximately 100 to 150 equine-assisted therapy sessions for disabled children & adults that could not afford them. These scholarships make the difference in recovery and progress for children, adults and families facing physical, mental and emotional disabilities that financially cripple individuals and their families.

2. How many Rotarians participated in the project? 3

3. What did they do? Please give at least two examples.

- Metroport Rotarians worked with Victory Therapy to identify how they could make the most impact.

4. How many Non-Rotarians participated in the project? 95

5. What are the expected long-term community impacts of the project?

- This assistance changed & will change lives of the recipients of services sponsored by improving mental and physical outcomes resulting in improved outlooks. This therapy immediately resulted in and will continue to result in improved physical and mental recovery among disabled and injured patients that could not afford this therapy on their own.

6. If a cooperating organization was involved, what was its role?

- We asked how we could help Victory Therapy Center with their mission. They identified support of scholarships that would make a dramatic difference for their target audience and Metroport Rotarians acted to address the needs identified with the assistance of this grant.

Financial Report *(District must retain receipts of all expenditures)-The two yellow cells must be the same.*

7. Income		Amount
1. District Grant funds received from the District		\$1,000.00
2. Other funding (specify) Rotary Club		\$1,000.00
3.		
Total Project Income		\$2,000.00
8. Expenditures (please be specific and add lines as needed) <i>Vendors/Non-profit Expenditures: List</i>		
1. Victory Therapy Center 2/21/22 Check #2778 written, cashed 3/9/22, for Riding therapy scholarships		\$2,000.00
2.		
3.		
4.		
5.		
Total Project Expenditures		\$2,000.00

9. By signing this report, I confirm that to the best of my knowledge these District Grant funds were spent only for eligible items in accordance with Trustee-approved guidelines, and that all of the information contained herein is true and accurate. I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned. I warrant that I own all rights in the photographs, including copyright, and hereby grant RI and TRF a royalty free irrevocable license to use the photographs now or at any time in the future, throughout the world in any manner it so chooses and in any medium now known or later developed. This includes the right to modify the photograph(s) as necessary in RI's sole discretion. This also includes, without limitation, use on or in the web sites, magazines, brochures, pamphlets, exhibitions and any other promotional materials of RI and TRF

Certifying Signature



Date:

5/30/22

Print name, Rotary title, and club

Mary Moe Georgia, Metroport Rotary Charities President,
Metroport Rotary Club

When completed, please upload to the documents section of www.matchinggrants.org, mark your grant "Reported" and notify the District Rotary Foundation Grant Sub-Committee Chair (DGSC):
Dusty Babitzke: dustybabitzke@yahoo.com